Case 2:12-cv-07719-CAS-VBK Document 30 Filed 05/11/15 Page 1 of 4 Page ID, #:288 FILED CLERK, U.S. DISTRICT COURT Name: derise elizabeth

Address: 90622 S. Broadyay HS

Redando Beach, California CENTRAL DISTRICT OF CALIFORNIA Fax: In Pro Per UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA CASE NUMBER: Plaintiff CV12-7719-CAS CVBKx) Notice Defendant(s). Notice of Refusal for Cause for Notive of withholding.

PLEADING PAGE FOR A SUBSEQUENT DOCUMENT

CV-127 (09/09)

Notice of Withholding

Automatic Data Processing Wage Garnishments P.O. Box 221230 El Paso, Texas 79912

475:2:1

DENISE S LAM 622 S. Broadway #5 Redondo Beach, CA 90277

Case Identifier:

Court Ordered Amount:

Court Ordered Percent:

Goal Amount:

Administrative Fee:

617750482

25.00% \$ 4,807.73 MONTHLY

Dear DENISE S LAM:

This is to notify you that a Tax Levy order has been received.

A copy of the order received has been a tached for specific details an icontact information for the issuing agency.

The deduction will begin within one to two pay periods from the day the order was received. Either a fixed dollar amount of a percentage will be deducted per pay period. Payments will be remitted to FRANCHISE TAX LOARD####

To dispute this order of to obtain a release to stop the deduction, please contact the issuing agency reflected on the stached order.

Once you have obtained any additional documentation such as a modification or a release, please forward it to your employer for processing or fax it to the below mentioned fax number.

Fax No: (909) 612-6105

For any other questions, you can access our Employee Brochure on https://garnishments.adp.com or call us at (866) 324-5191.

Sincerely, ADP Garnishment Services

04/29/2015

CPK1

*If this is for a tax levy and no amount or percent is indicated, the deduction amount will be calculated based on married filing separately with one exemption. If this does not reflect your actual marital and exemption status, please contact the issuing agency.



Notice Date: 04/15/15

REQUEST FOR EARNINGS WITHHOLDING ORDER PAYMENT INFORMATION

13209298000 CALIFORNIA PIZZA KITCHEN LTD **PAYROLL** 12181 W BLUFF CREEK DR STE 5 PLAYA VISTA CA 90094-2627

Account Number: 617-75-0482 Amount Due : \$4,807,73 Tax Year(s) : 2011,2010,2009

Order Number : 714193150001155271

Taxpayer's Name: DENISE S LAM

We have no record of payment or a response to the recent Earnings Withholding O Taxes. If payment has been made, please provide the following inform atio n and, if available, a copy of both sides e canceled check (s) used as remittance.

AMOUNT PAID	DATE REMITTED	ADDRESS MAILED TO		
\$			j	
_			- N -	

If the individual is no longer employed by you or you have not submitted a ayments, please complete the following:

TAXPAYER'S FULL NAME	SOCIAL SECURI	ТУДИМВЕЯ	OCCUPATION
TAXPAYER'S PRESENT OR LAST KNOWN ADOR	ESS		TELEPHONE NUMBER
TAXPAYER'S TURRENT EMPLOTER	ADDRESS		TELEPHONE NUMBER
UNION AFFILIATION OF MEXT OF KIN	ADDRESS		TELEPHONE NUMBER
REASON FOR NOT HONORING EARNINGS WITHHOLDING ORDER		DATE TAXPAYER TERMINATED?	PLAN TO REHIRE? ☐ YES DATE:
INFORMATION COMPLETED BY		POSITION	TELEPHONE NUMBER
			

If you are delaying payment because you have questions about the Earnings Withholding Order, please telephone the number listed below for assistance. FAILURE TO COMPLY WITH THE REQUIREMENTS SET FORTH IN THE PREVIOUSLY SENT EARNINGS WITHHOLDING ORDER MAY MAKE YOU LIABLE FOR THE AMOUNT DUE.

If you are made liable for the amount due, we can impose collection fees, contact third parties, file state tax liens, and take other collection actions. Please contact us if you have any questions.

Authorized Representative

Telephone: (800) 689-4776

FTB 4931 ARCS (REV 02-1999)

Denise Elizabeth 622 S. Broadway #5 Redondo Beach, California. [90277]

United States District Court for the Central District of California 312 North Spring Street Los Angeles, California. [90012-4701] Registered mail # R 370 577 527 US

Dear clerk;

to:

Please file this order in the case jacket of Article III case CV12-7719 CAS (VBKx). This is evidence if this presenter claims I have obligations to perform or makes false claims against me in the future.

Certificate of Mailing

My signature below expresses that I have mailed a copy of the presentment, with the original clerk instruction

Demand for lawful money pursuant to Title 12 US Section 411

Denise Elizabeth

Automatic Data Processing Wage Garnishments P.O. Box 221230 El Paso Texas [79912]

Cert #: 7012 1010 0003 0298 4839

STATE OF CALIFORNIA FRANCHISE TAX BOARD P.O. Box 942867 SACRAMENTO [94267]

Cert #: 7012 1010 0003 0298 4778